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Federal Communications Commissi Washington, D.C. 20554	on	A <sub>1</sub> 3060-0922 (5	pproved by OMB September 2002)	FOR FCC USE ONLY	
, and the second	FCC 397	(,	,		
BROADCAST MID-TERM REPORT			FOR COMMISSION USE ONLY FILE NO. B397 - 20100730ACQ		
Legal Name of the Licensee NBC TELEMUNDO LICENS					
Mailing Address 1299 PENNSYLVANIA AVE 9TH FL.	NUE, NW				-
City WASHINGTON			State or Cou DC	ıntry (if foreign address)	Zip Code 20004 -
Telephone Number (include area code)				ess (if available) .TOBEY@NBCUNI.COM	
FCC Registration Number 0009825456		Facility ID Num 47906	nber	Call Sign KNBC	
TYPE OF BROADCAST STATION:	Commercia Radio TV Low Po		ation	Noncommercial Broadcast Sta Educational Radio Educational TV	ation
Application Purpose	ı Report				
more employees. Also list st the table below which station licensees include stations or information provided in Sect efforts at brokered stations,	tations opera ns are opera perated purs ions I throug as well as a	ated by the lice ated pursuant to suant to a time gh III should tak ny other station	nsee pursuar o a time broke brokerage ag ke into consid ns, included o	commonly owned stations that it to a time brokerage agreemed arage agreement. To the exten reement on this report, responeration the licensee's EEO corn this form. For purposes of the stations in the same market that	ent. Indicate on it that ses or npliance is form, a

## Station List

List call sign and location of all stations included on this report. List commonly owned stations that share one or more employees. Also list stations operated by the licensee pursuant to a time brokerage agreement. Indicate on the table below which stations are operated pursuant to a time brokerage agreement. To the extent that licensees include stations operated pursuant to a time brokerage agreement on this report, responses or information provided in Sections I through III should take into consideration the licensee's EEO compliance efforts at brokered stations, as well as any other stations, included on this form. For purposes of this form, a station employment unit is a station or a group of commonly owned stations in the same market that share at least one employee.

Call Sign	Facility ID Number	Type (check applicable box)	Location (City/State)	Time Brokerage Agreement (check applicable box)
KNBC	47906	CAMCFMFTV	LOS ANGELES, CA	C Yes No

Signed

E.					
KVEA	19783	CAM	FM ® TV	CORONA, CA	C Yes C No
KWHY-TV	26231	CAM	FM ® TV	LOS ANGELES, CA	C Yes Ro
SEND NOTICE	ES AND CO	OMMUNICA		IE FOLLOWING NAMED PE ED BELOW:	RSON AT THE ADDRESS
Name MARGARET L. 1				Street Address 1299 PENNSYLVANIA AV 9TH FLOOR	/ENUE, NW
City WASHINGTON			Zip Code 20004-	Telephone Number 2026374262	
			FILING IN	STRUCTIONS	
refrain from discri and sex. See 47 of that employs five a television statio report need be file A copy of this Mic result in sanctions authorized by the	minating in C.F.R. Sector more ful on employmed [through I-Term Reperture]  Gommunication of the content of the	n employmention 73.2080 Il-time stationent unit emplement Section I are cort must be tes. These recations Act of	at and related It. Pursuant to the employees in ploys fewer that the Certificant kept in the state equirements are full 1934, as among the end of the certificant the state equirements are full 1934, as among the end of t	these requirements, a televis nust file a full and complete E an five full-time employees, o ation]. tion's public file. Failure to me e contained in 47 C.F.R. Sec	color, national origin, religion, ion station employment unit Broadcast Mid-Term Report. If inly the first two pages of this neet these requirements may ction 73.2080 and are
Section I					
	employme er than elev	ent unit empl en full-time	oy fewer than employees, if	five full-time employees, if radio?	
below, return the lirest of this form. It	form to the fyour static	FCC, and plon employme	lace a copy in ent unit employ	owever, you have the option your station(s) public file. Yo ys five or more full-time empl ee all of this form and follow a	ou do not have to complete the loyees, if television, or eleven
<ul> <li>C. By an officer, if</li> </ul>	an individua a partnersh a corporat	al; hip (general tion or an ass	sociation; or	nited partnership); sability or absence from the	United States of the licensee.
WILLFUL FALSE STAT AND/OR REVOCA	EMENTS ON FION OF ANY	STATION LICE	NSE OR CONSTR	NY FINE AND/OR IMPRISONMENT (L UCTION PERMIT (U.S. CODE, TITLE DE, TITLE 47, SECTION 503).	J.S. CODE, TITLE 18, SECTION 1001), E 47, SECTION 312(a)(1)), AND/OR
I certify to the be true and correct.		nowledge, i	nformation a	nd belief, all statements co	intained in this report are

Name of Respondent

	MARGARET L. TOBEY	
Title	Telephone No. (include area code)	
ASSISTANT SECRETARY	2026374262	
Date		
07/30/2010		

#### **GENERAL POLICY**

A broadcast station must provide equal employment opportunity to all qualified individuals without regard to their race, color, national origin, religion or sex in all personnel actions including recruitment, evaluation, selection, promotion, compensation, training and termination.

# Section II

### RESPONSIBILITY FOR IMPLEMENTATION

A broadcast station must assign a particular official overall responsibility for equal employment opportunity at the station. That official's name and title are:

Name: ENRIQUE CABALLERO

Title: VICE PRESIDENT, HUMAN RESOURCES

It is also the responsibility of all persons at a broadcast station making employment decisions with respect to recruitment, evaluation, selection, promotion, compensation, training and termination of employees to ensure that no person is discriminated against in employment because of race, color, religion, national origin or sex.

### Section III

### MID-TERM REPORT

Television station employment units with five or more full-time employees and radio station employment units with more than ten full-time employees filing in the middle of the license term must attach a copy of each of the two most recent EEO public file reports (the reports from this year and last year). Stations are required to place annually such information as is required by 47 C.F.R. Section 73.2080 in their public files.

[Exhibit 1]

#### FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

We have estimated that each response to this collection of information will average 30 minutes. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-0922), Washington, D.C. 20554. We will also accept your comments via the Internet if you send them to PRA@fcc.gov. Remember - you are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0922.

THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, P.L. 104-13, OCTOBER 1, 1995, 44 U.S.C. 3507.

#### **Exhibits**

#### Attachment 1

Description	
2010 Annual EEO Rept KNBC, KVEA, KWHY	
2009 Annual EEO Rept KNBC, KVEA, KWHY	100 ml may